



Your business
is our business.

REDACTED – FOR PUBLIC INSPECTION

7852 Walker Drive, Suite 200
Greenbelt, Maryland 20770
phone: 301-459-7590, fax: 301-577-5575
internet: www.jsitel.com, e-mail: jsi@jsitel.com

October 10, 2013

By Hand Delivery

Marlene H. Dortch, Secretary
Federal Communications Commission
Office of the Secretary
445 12th Street, SW
Washington, DC 20554

**Re: WC Docket No. 10-90, WC Docket No. 11-42
2013 ETC Annual Report of Ben Lomand Rural Telephone Cooperative, Inc.
Study Area Code 290553**

Dear Ms. Dortch:

On behalf of Ben Lomand Rural Telephone Cooperative, Inc. “Ben Lomand”, JSI files the attached confidential and redacted versions of the FCC Form 481 ETC annual reporting information pursuant to sections 54.313 and 54.422 of the Commission’s rules.¹ Ben Lomand seeks confidential treatment under Protective Order for section 54.313(f)(2) financial information.² The redacted version is also being filed this date via the FCC’s Electronic Comment Filing System.

Please direct any questions regarding the filing to the undersigned.

Sincerely,

John Kuykendall
JSI Vice President
301-459-7590
jkuykendall@jsitel.com

cc: Charles Tyler, Telecommunications Access Policy Division (two copies, confidential)

¹ 47 C.F.R. §§ 54.313, 54.422.

² *Connect America Fund et al.*, WC Docket No. 10-90 *et al.*, Protective Order, DA 12-1857 rel. Nov. 16, 2012 (Protective Order). 47 C.F.R. § 54.313(f)(2).

FCC Form 481 - Carrier Annual Reporting Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010> Study Area Code	290553
<015> Study Area Name	BEN LOMAND RURAL
<020> Program Year	2014
<030> Contact Name: Person USAC should contact with questions about this data	Todd Crandall
<035> Contact Telephone Number: Number of the person identified in data line <030>	270-856-9983
<039> Contact Email Address: Email of the person identified in data line <030>	tcrandall@tmsvcs.com

ANNUAL REPORTING FOR ALL CARRIERS	54.313 Completion Required	54.422 Completion Required
<100> Service Quality Improvement Reporting (complete attached worksheet)	<input type="checkbox"/>	<input type="checkbox"/>
<200> Outage Reporting (voice) (complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<210> <input checked="" type="checkbox"/> <-- check box if no outages to report		
<300> Unfulfilled Service Requests (voice)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<310> Detail on Attempts (voice) (attach descriptive document)	<input type="checkbox"/>	<input type="checkbox"/>
<320> Unfulfilled Service Requests (broadband)	<input type="checkbox"/>	<input type="checkbox"/>
<330> Detail on Attempts (broadband) (attach descriptive document)	<input type="checkbox"/>	<input type="checkbox"/>
<400> Number of Complaints per 1,000 customers (voice)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<410> Fixed 0.0		
<420> Mobile		
<430> Number of Complaints per 1,000 customers (broadband)	<input type="checkbox"/>	<input type="checkbox"/>
<440> Fixed		
<450> Mobile		
<500> Service Quality Standards & Consumer Protection Rules Compliance (check to indicate certification)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<510> 290553tn510 (attached descriptive document)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<600> Functionality in Emergency Situations (check to indicate certification)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<610> 290553tn610 (attached descriptive document)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<700> Company Price Offerings (voice) (complete attached worksheet)	<input type="checkbox"/>	<input type="checkbox"/>
<710> Company Price Offerings (broadband) (complete attached worksheet)	<input type="checkbox"/>	<input type="checkbox"/>
<800> Operating Companies and Affiliates (complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<900> Tribal Land Offerings (Y/N)? (if yes, complete attached worksheet)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<1000> Voice Services Rate Comparability (check to indicate certification)	<input type="checkbox"/>	<input type="checkbox"/>
<1010> (attach descriptive document)	<input type="checkbox"/>	<input type="checkbox"/>
<1100> Terrestrial Backhaul (Y/N)? (if not, check to indicate certification)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<1110> (complete attached worksheet)	<input type="checkbox"/>	<input type="checkbox"/>
<1200> Terms and Condition for Lifeline Customers (complete attached worksheet)	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Price Cap Carriers, Proceed to Price Cap Additional Documentation Worksheet

Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers

<2000>	(check to indicate certification)	<input type="checkbox"/>
<2005>	(complete attached worksheet)	<input type="checkbox"/>

Rate of Return Carriers, Proceed to ROR Additional Documentation Worksheet

<3000>	(check to indicate certification)	<input checked="" type="checkbox"/>
<3005>	(complete attached worksheet)	<input checked="" type="checkbox"/>

**(100) Service Quality Improvement Reporting
Data Collection Form**

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	290553
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<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Todd Crandall
<035>	Contact Telephone Number - Number of person identified in data line <030>	270-856-9983
<039>	Contact Email Address - Email Address of person identified in data line <030>	tcrandall@tmsvcs.com

<110>	Has your company received its ETC certification from the FCC?	(yes / no)	<input type="radio"/>	<input checked="" type="radio"/>
If your answer to Line <110> is yes, do you have an existing §54.202(a) "5				
<111>	year plan" filed with the FCC?	(yes / no)	<input type="radio"/>	<input type="radio"/>

If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service.

<112> Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your company is a CETC which only receives frozen support, your progress report is only required to address voice telephony service.

Name of Attached Document (.pdf)

Please check these boxes below to confirm that the attached PDF, on line 112, contains a progress report on its five-year service quality improvement plan pursuant to § 54.202(a). The information shall be submitted at the wire center level or census block as appropriate.

- <113> Maps detailing progress towards meeting plan targets
- <114> Report how much universal service (USF) support was received
- <115> How (USF) was used to improve service quality
- <116> How (USF) was used to improve service coverage
- <117> How (USF) was used to improve service capacity
- <118> Provide an explanation of network improvement targets not met in the prior calendar year.

<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

[illegible]

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	290553
<015>	Study Area Name	BEN LOMAND RURAL
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Todd Crandall
<035>	Contact Telephone Number - Number of person identified in data line <030>	270-856-9983
<039>	Contact Email Address - Email Address of person identified in data line <030>	tcrandall@tmsvcs.com
<810>	Reporting Carrier	Ben Lomand Rural Telephone Cooperative, Inc.
<811>	Holding Company	
<812>	Operating Company	Ben Lomand Rural Telephone Cooperative, Inc.

[illegible]

(900) Tribal Lands Reporting Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010>	Study Area Code	290553
<015>	Study Area Name	BEN LOMAND RURAL
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Todd Crandall
<035>	Contact Telephone Number - Number of person identified in data line <030>	270-856-9983
<039>	Contact Email Address - Email Address of person identified in data line <030>	tcrandall@tmsvcs.com

<910> Tribal Land(s) on which ETC Serves

<920> Tribal Government Engagement Obligation

Name of Attached Document (.pdf)

If your company serves Tribal lands, please select (Yes,No, NA) for each these boxes to confirm the status described on the attached PDF, on line 920, demonstrates coordination with the Tribal government pursuant to § 54.313(a)(9) includes:

- <921> Needs assessment and deployment planning with a focus on Tribal community anchor institutions;
- <922> Feasibility and sustainability planning;
- <923> Marketing services in a culturally sensitive manner;
- <924> Compliance with Rights of way processes
- <925> Compliance with Land Use permitting requirements
- <926> Compliance with Facilities Siting rules
- <927> Compliance with Environmental Review processes
- <928> Compliance with Cultural Preservation review processes
- <929> Compliance with Tribal Business and Licensing requirements.

Select (Yes,No, NA)

**(1100) No Terrestrial Backhaul Reporting
Data Collection Form**

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	290553
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<039>	Contact Email Address - Email Address of person identified in data line <030>	tcrandall@tmsvcs.com

<1120> Please check this box to confirm no terrestrial backhaul options exist within the supported area pursuant to § 54.313(G) ☐

<1130> Please check this box to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(G) ☐

(1200) Terms and Condition for Lifeline Customers		FCC Form 481
Lifeline		OMB Control No. 3060-0986/OMB Control No. 3060-0819
Data Collection Form		July 2013

<010>	Study Area Code	290553
<015>	Study Area Name	BEN LOMAND RURAL
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Todd Crandall
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<039>	Contact Email Address - Email Address of person identified in data line <030>	tcrandall@tmsvcs.com

<1210>	Terms & Conditions of Voice Telephony Lifeline Plans	290553tn1210
		Name of attached document (.pdf)

<1220>	Link to Public Website	HTTP http://www.benlomandconnect.com/wp/wp-content/uploads/2013/09/BLC_Lifeline-Information.pdf
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"Please check these boxes below to confirm that the attached PDF, on line 1210, or the website listed, on line 1220, contains the required information pursuant to § 54.422(a)(2) annual reporting for ETCs receiving low-income support, carriers must annually report:

<1221>	Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers,	<input checked="" type="checkbox"/>
<1222>	Details on the number of minutes provided as part of the plan,	<input checked="" type="checkbox"/>
<1223>	Additional charges for toll calls, and rates for each such plan.	<input checked="" type="checkbox"/>

(2000) Price Cap Carrier Additional Documentation

Data Collection Form

Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	290553
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<020>	Program Year	2014
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<039>	Contact Email Address - Email Address of person identified in data line <030>	tcrandall@tmsvcs.com

CHECK the boxes below to note compliance as a recipient of Incremental Connect America Phase I support, frozen High Cost support, High Cost support to offset access charge reductions, and Connect America Phase II support as set forth in 47 CFR § 54.313(b),(c),(d),(e) the information reported on this form and in the documents attached below is accurate.

Incremental Connect America Phase I reporting

- <2010> 2nd Year Certification {47 CFR § 54.313(b)(1)}
- <2011> 3rd Year Certification {47 CFR § 54.313(b)(2)}

Price Cap Carrier Receiving Frozen Support Certification {47 CFR § 54.312(a)}

- <2012> 2013 Frozen Support Certification
- <2013> 2014 Frozen Support Certification
- <2014> 2015 Frozen Support Certification
- <2015> 2016 and future Frozen Support Certification

Price Cap Carrier Connect America ICC Support {47 CFR § 54.313(d)}

- <2016> Certification Support Used to Build Broadband

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Connect America Phase II Reporting {47 CFR § 54.313(e)}

- <2017> 3rd year Broadband Service Certification
- <2018> 5th year Broadband Service Certification
- <2019> Interim Progress Certification
- <2020> Please check the box to confirm that the attached PDF , on line 2021, contains the required information pursuant to § 54.313 (e)(3)(ii), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.
- <2021> Interim Progress Community Anchor Institutions

Name of Attached Document Listing Required Information

(3000) Rate Of Return Carrier Additional Documentation Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010>	Study Area Code	290553
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<039>	Contact Email Address - Email Address of person identified in data line <030>	tcrandall@tmsvcs.com

CHECK the boxes below to note compliance on its five year service quality plan (pursuant to 47 CFR § 54.202(a)) and, for privately held carriers, ensuring compliance with the financial reporting requirements set forth in 47 CFR § 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.

Progress Report on 5 Year Plan

(3010) Milestone Certification {47 CFR § 54.313(f)(1)(i)} Please check this box to confirm that the attached PDF, on line 3012, contains the required information pursuant to § 54.313 (f)(1)(ii), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.	Name of Attached Document Listing Required Information	<input style="width: 100px; height: 15px;" type="text"/>
(3012) Community Anchor Institutions {47 CFR § 54.313(f)(1)(ii)} (3013) Is your company a Privately Held ROR Carrier {47 CFR § 54.313(f)(2)} (3014) If yes, does your company file the RUS annual report Please check these boxes to confirm that the attached PDF, on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires:	Name of Attached Document Listing Required Information	<input checked="" type="checkbox"/> (Yes/No) <input checked="" type="checkbox"/> (Yes/No)
(3015) Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers) (3016) PDF of Balance Sheet, Income Statement and Statement of Cash Flows	Name of Attached Document Listing Required Information	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
(3017) If the response is yes on line 3014, attach your company's RUS annual report and all required documentation (3018) If the response is no on line 3014, Is your company audited? If the response is yes on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains :	Name of Attached Document Listing Required Information	290553tn3017 <input type="checkbox"/> (Yes/No)
(3019) Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications (3020) PDF of Balance Sheet, Income Statement and Statement of Cash Flows	Name of Attached Document Listing Required Information	<input type="checkbox"/> <input type="checkbox"/>
(3021) Management letter issued by the independent certified public accountant that performed the company's financial audit. If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains: Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers,	Name of Attached Document Listing Required Information	<input type="checkbox"/> <input type="checkbox"/>
(3022) Underlying information subjected to a review by an independent certified public accountant (3023) Underlying information subjected to an officer certification. (3024) PDF of Balance Sheet, Income Statement and Statement of Cash Flows	Name of Attached Document Listing Required Information	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
(3025) Attach the worksheet listing required information (3026)	Name of Attached Document Listing Required Information	<input type="text"/>

Certification - Reporting Carrier Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010> Study Area Code	290553
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<039> Contact Email Address - Email Address of person identified in data line <030>	tcrandall@tmsvcs.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients	
I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.	
Name of Reporting Carrier:	
Signature of Authorized Officer:	Date
Printed name of Authorized Officer:	
Title or position of Authorized Officer:	
Telephone number of Authorized Officer:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

Certification - Agent / Carrier Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010> Study Area Code	290553
<015> Study Area Name	BEN LOMAND RURAL
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<030> Contact Name - Person USAC should contact regarding this data	Todd Crandall
<035> Contact Telephone Number - Number of person identified in data line <030>	270-856-9983
<039> Contact Email Address - Email Address of person identified in data line <030>	tcrandall@tmsvcs.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

Certification of Officer to Authorize an Agent to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier	
I certify that (Name of Agent) <u>Trevor Bonnstetter</u> is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.	
Name of Authorized Agent:	Trevor Bonnstetter
Name of Reporting Carrier:	BEN LOMAND RURAL
Signature of Authorized Officer:	CERTIFIED ONLINE Date: 10/10/2013
Printed name of Authorized Officer:	Trevor Bonnstetter
Title or position of Authorized Officer:	CEO
Telephone number of Authorized Officer:	931.473.2517
Study Area Code of Reporting Carrier:	290553 Filing Due Date for this form: 10/15/2013
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier	
I, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipients on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate.	
Name of Reporting Carrier:	BEN LOMAND RURAL
Name of Authorized Agent or Employee of Agent:	John Staurulakis, Inc.
Signature of Authorized Agent or Employee of Agent:	CERTIFIED ONLINE Date: 10/10/2013
Printed name of Authorized Agent or Employee of Agent:	Alice Lewis
Title or position of Authorized Agent or Employee of Agent:	Manager
Telephone number of Authorized Agent or Employee of Agent:	217-498-6863
Study Area Code of Reporting Carrier:	290553 Filing Due Date for this form: 10/15/2013
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

Attachments

(800) Operating Companies

Data Collection Form

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	290553
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<039>	Contact Email Address - Email Address of person identified in data line <030>	tcrandall@tmsvcs.com
<810>	Reporting Carrier	Ben Lomand Rural Telephone Cooperative, Inc.
<811>	Holding Company	
<812>	Operating Company	Ben Lomand Rural Telephone Cooperative, Inc.

[illegible]

Ben Lomand Rural Telephone Cooperative, Inc.’s demonstration of complying with applicable service quality standards and consumer protection rules:

In establishing this certification in its *2005 ETC Order*,¹ the FCC found that an ETC must make “a specific commitment to objective measures to protect consumers.”² The Commission found that for wireless ETCs, compliance with CTIA’s Consumer Code for Wireless Service would satisfy this requirement” and that the sufficiency of other commitments would be considered on a case-by-case basis.³ In this context, the FCC stated, “to the extent a wireline or wireless ETC applicant is subject to consumer protection obligations under state law, compliance with such laws may meet our requirement.”⁴

As a Cooperative, and in accordance with Tennessee Code Annotated, Title 65 Public Utilities and Carriers, Chapter 29 Telephone Cooperatives, Ben Lomand Rural Telephone Cooperative, Inc. (“Company”) is not governed by the Rules of the Tennessee Regulatory Authority for service quality standards and consumer protection rules. However, the Company in the interest of protecting its own customers has incorporated consumer protection procedures comparable to those required of ILEC’s in the State of Tennessee, allowing the Company to meet or exceed existing TRA rules.

These procedures include, but are not limited to, the following: (1) publishing the rates,

¹ *Federal-State Joint Board on Universal Service*, CC Docket No. 96-45, Report and Order, FCC 05-46 (rel. Mar. 17, 2005) (“*2005 ETC Order*”).

² *Id.* at para. 28.

³ *Id.* The FCC noted that under the CTIA Consumer Code, wireless carriers agree to: “(1) disclose rates and terms of service to customers; (2) make available maps showing where service is generally available; (3) provide contract terms to customers and confirm changes in service; (4) allow a trial period for new service; (5) provide specific disclosures in advertising; (6) separately identify carrier charges from taxes on billing statements; (7) provide customers the right to terminate service for changes to contract terms; (8) provide ready access to customer service; (9) promptly respond to consumer inquiries and complaints received from government agencies; and (10) abide by policies for protection of consumer privacy.” *Id.* at n. 71.

⁴ *Id.* at n. 72.

terms, and conditions of service; (2) implementation of anti-slamming and consumer protection procedures; (3) modeling bill presentation to reflect the truth-in-billing requirements; and (4) CPNI, Red Flag Rules, and other applicable federal requirements governing the protection of customers' privacy.

Ben Lomand Rural Telephone Cooperative, Inc.'s Ability to Function in Emergency Situations

Ben Lomand Rural Telephone Cooperative, Inc. ("Company") hereby certifies that it is able to function in emergency situations as set forth in Code of Federal Regulations, Title 47, Part 54, Subpart C, §54.202(a)(2).¹ The Company's network is designed to remain functional in emergency situations without an external power source, is able to reroute traffic around damaged facilities, and is capable of managing traffic spikes resulting from emergency situations as required by Section 54.202(a)(2). The Company can change call routing translations as needed to reroute traffic around damaged facilities. Changing call routing translations will also allow the Company to manage traffic spikes throughout its network, as emergency situations require.

As a Cooperative, and in accordance with Tennessee Code Annotated, Title 65 Public Utilities and Carriers, Chapter 29 Telephone Cooperatives, Ben Lomand Rural Telephone Cooperative, Inc. is not governed by the Rules of Tennessee Regulatory Authority, Chapter 1220-4-2, 1220-4-2-.23 Emergency Operation. However, in compliance with Federal emergency situations rules the Company's central offices have adequate provision for emergency power a condition allowing them to meet or exceed existing TRA rules for emergency operations. Specifically, each central office building is supplied with standby generators and battery back-up that enable the central office to keep running until power is restored so long as fuel is available, or until system changes

¹ Section 54.202(a)(2) requires ETCs that are designated by the Commission to "demonstrate its ability to remain functional in emergency situations, including a demonstration that it has a reasonable amount of back-up power to ensure functionality without an external power source, is able to reroute traffic around damaged facilities, and is capable of managing traffic spikes resulting from emergency situations."

are made to reroute traffic. Company has battery backup at all office locations and in its electronic equipment sites. Length of run time is determined by the equipment serving the area and the number of customers working out of the equipment.

Do you need help

paying for

Telephone Service?



You are eligible to enroll in the Lifeline program if you participate in one of the following:

Tennessee criteria:

- Food Stamps
- Medicaid
- Supplemental Security Income (SSI)
- Temporary Assistance for Needy Families (TANF)
- Low Income Home Energy Assistance Program (LIHEAP)
- Free Lunch Program

OR live in Section 8 federal housing.

(Section 8 only. HUD and other federal programs may not automatically qualify).

What is the Lifeline Program?

Established by the FCC to ensure that telephone service is available and affordable for low income telephone subscribers. Administered by the TN Regulatory Authority, the Lifeline program reduces the monthly local service portion of your telephone bill.

Lifeline does not assist with the long distance portion of your bill or with special features such as Caller ID or Call Waiting.



Two Ways to Apply for Lifeline:

If you receive one of any of the available public assistance programs (see list on front), call Ben Lomand Connect to provide you with an application.

OR

If you "DO NOT" receive public assistance, you may qualify if your total household gross monthly income is equal or less than the amounts found in the Gross Monthly Income table on the TRA website at

www.tn.gov/tra/consumerfiles/teleassist.shtml

Tennessee Regulatory Authority

Consumer Services Division

460 James Robertson Parkway

Nashville, TN 37243-0505

1-800-342-8359 (voice)

1-888-276-0677 (TTY)

615-741-8953 (fax)



800.974.7779 • www.blomand.net



- Bundles
- Local & Long Distance
- Internet
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- Business
- Secure Connect
- Secure Care
- Cellular
- Flite

- LOCAL
- CALLING FEATURES
- VOICE MAIL
- LONG DISTANCE

Local Service & Pricing

[SERVICES FOR CITY OF MANCHESTER, MCMINNVILLE AND SPARTA CUSTOMERS](#)

Residential Installation Charge	\$20.00 (one time)
Premise Visit:	\$35.00 (one time)
Service Connection Charge:	

Residential Basic Phone Line:	\$14.00 (monthly)
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Residential Coop Membership Fee:	\$10.00 (one time)
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[Capital Credit Information](#)

Residential Basic Phone Line:	\$11.70 (monthly)
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[Explanation of Your Telephone Bill](#)

Inside Wire Maintenance (optional):	\$2.00 (monthly)
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[Explanation of Inside Wire Maintenance](#)

Beginning July 1, 2012, Ben Lomand Connect customers will see the Access Recovery Charge added to their phone bill.

[Learn more ...](#)

Do you need help paying your telephone service? Click on the link below to learn if you are eligible to enroll in the Lifeline program.

[Learn more ...](#)

Support & Service

Customer service and tech support for Internet, Phone and TV service.

Online Billing

Go paperless - view and pay your bill online.

Ben Lomand Connect Stores

Pay your bill, learn about our services, get questions answered and more.

Online Yellow Pages

Local search made simple – find local businesses Phone numbers and addresses online.



REDACTED - FOR PUBLIC INSPECTION

[Store Locator](#) [Corporate Info](#) [Terms & Conditions](#) [Privacy Policy](#) [Acceptable Use Policy](#) [Tariffs](#) [Internet/Network Practices](#) [Contact Us](#) [The Connection](#)

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CURRENT WEATHER CONDITIONS:



FAIR
TEMP: 59°F
WIND: VARIABLE AT 6MPH
HUMIDITY: 54%
[5-DAY FORECAST](#) - [NOAA](#)

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BEN LOMAND TELEPHONE COOPERATIVE, INC. (SAC 290553)

ATTACHMENT - LINE 3017

ATTACHMENT REDACTED IN ENTIRETY